Department of Medical Assistance Services
600 East Broad Street
Suite 1300
Richmond, VA 23219

https://dmas.virginia.gov

MEDICAID MEMO

Last Updated: 03/09/2022

Processing and Payment of Emergency Room Claims

The purpose of this memorandum is to provide you with information regarding changes to processing and payment of claims submitted to the Department of Medical Assistance Services (DMAS) for rendered emergency room (ER) services.

Please Note: These changes only affect recipients enrolled in MEDALLION and fee-for-service Medicaid and FAMIS. These changes do not apply to those enrolled in Managed Care Organizations.

Effective with dates of service on and after May 1, 2004, DMAS will permit automatic payment at the full Medicaid allowed amount for claims submitted with ER procedure codes 99284 and 99285. Claims for these procedure codes will pay at the full Medicaid allowed amount regardless of the diagnosis code and will **no longer** pend for manual review. Additionally, the corresponding hospital claim will also pay at the full Medicaid rate. In the event the hospital claim is processed prior to submission of the emergency room physician's claim and is reduced to the $30 non-emergency rate, DMAS will adjust the hospital claim to allow full payment. Claims processed with ER procedure codes 99281, 99282, and 99283, will remain unchanged.

Medicaid will also begin performing post payment reviews of physician claims billed with procedure codes 99284 and 99285 as well as the corresponding hospital claim. Claims found to be inappropriately paid based on review of the claim, patient's medical records, and services rendered will be adjusted to pay at the reduced non-emergency rates of $20 for physicians and

$30 for hospitals. Providers will be notified by letter of these adjusted claim(s). Providers will have the right to appeal any adjusted claim(s).

Client Medical Management Program (CMM)

These changes do not impact claims for ER services for Client Medical Management Program (CMM) individuals, which will continue to pay according to current diagnosis-related procedures. Diagnoses on the **Payable ER Diagnosis Code Table** (Chapter IV, Exhibits Section of the *Hospital Manual*) will pay at the full Medicaid rate. All ER claims with diagnoses on the **Pend ER Diagnosis Code Table** (Chapter IV, Exhibits Section of the *Hospital Manual*) will pend for manual review. Pended claims determined to be non-emergency will be denied unless the CMM Primary Care Physician (PCP) referred the recipient to the ER and provided a CMM Practitioner Referral Form (DMAS-70) to be attached to the claim.

ELIGIBILITY AND CLAIMS STATUS INFORMATION

DMAS offers a web-based Internet option to access information regarding Medicaid eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification information. The website address to use to enroll for access to this system is http://virginia.fhsc.com. The MediCall voice response system will provide the same information and can be accessed by calling 800-884-9730 or 800-772-9996. Both options are available at no cost to the provider.

COPIES OF MANUALS

DMAS publishes electronic and printable copies of its provider manuals and Medicaid Memoranda on the DMAS website at www.dmas.virginia.gov (***please note the new DMAS website address***). Refer to the Provider Column to find Medicaid and SLH provider manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet, or would like a paper copy of a manual, you can order these by contacting Commonwealth-Martin at

804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

"HELPLINE"

The "HELPLINE" is available Monday through Friday from 8:30 a.m. to 4:30 p.m., except State holidays, to answer questions. The "HELPLINE" numbers are:

786-6273
Richmond area
1-800-552-8627
All other areas

Please remember that the "HELPLINE" is for provider use only.